

# **HEALTH ANNUAL STATEMENT**

FOR THE YEAR ENDED DECEMBER 31, 2016 OF THE CONDITION AND AFFAIRS OF THE

# HealthLink HMO, Inc.

NAIC G	roup Code 0671 0671 NAIC Co	ompany Code 96475 Employer's II	D Number <u>43-1616135</u>
Organized under the Laws of		, State of Domicile or Port of Er	ntry MO
Country of Domicife	U	nited States of America	
Licensed as business type:	Healti	h Maintenance Organization	
Is HMO Federally Qualified? Ye	es[]No[X]		
Incorporated/Organized	07/29/1992	Commenced Business _	01/14/1993
Statutory Home Office	1831 Chestnut Street		St. Louis , MO, US 63103-2275
	(Street and Number)	(City o	r Town, State, Country and Zip Code)
Main Administrative Office		1831 Chestnut Street (Street and Number)	
	Louis , MO, US 63103-2275	·	314-923-4444
(City or T	own, State, Country and Zip Code)	(A	rea Code) (Telephone Number)
Mail Address	120 Monument Circle		Indianapolis , IN, US 46204
	(Street and Number or P.O. Box)	(City or	Town, State, Country and Zip Code)
Primary Location of Books and I	Records	120 Monument Circle (Street and Number)	
	ndianapolis , IN, US 46204	(Sieer and Namber)	317-488-6716
(City or T	own, State, Country and Zip Code)	(A	rea Code) (Telephone Number)
Internet Website Address		www.healthlink.com	
Statutory Statement Contact	Tim Niccum		317-488-6716
•	(Name)	· · · · · · · · · · · · · · · · · · ·	(Area Code) (Telephone Number)
	Tim.Niccum@anthem.com (E-mail Address)		317-488-6169 (FAX Number)
	,	OFFICERS	(······
President	Steven John Martenet	OFFICERS Treasurer	Robert David Kretschmer
Secretary		Assistant Secretary _	•
		OTHER	
Eric (Rick) Kenneth Nobl	e, Assistant Treasurer Keith Day	vid McDaniel #, Valuation Actuary	
	DIRE	CTORS OR TRUSTEES	
Ronald Willian		Clause John Madaget	Catherine Irene Kelaghan
State of	Indiana SS:		
	Walton		
The officers of this reporting ent	ity being duly swom, each depose and say that	they are the described officers of said rec	orting entity, and that on the reporting period stated above,
all of the herein described asse	ets were the absolute property of the said repo	orling entity, free and clear from any liens	or claims thereon, except as herein stated, and that this
statement, together with related condition and affairs of the said	exhibits, schedules and explanations therein c reporting entity as of the reporting period state.	ontained, annexed or referred to, is a full a d above, and of its income and deductions	and true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed
in accordance with the NAIC Ar	anual Statement Instructions and Accounting F	ractices and Procedures manual except t	o the extent that: (1) state law may differ: or (2) that state
rules or regulations require di respectively. Furthermore the	ferences in reporting not related to account scope of this attestation by the described officers.	ing practices and procedures, according	to the best of their information, knowledge and belief ag electronic filing with the NAIC, when required, that is an
exact copy (except for formalting	g differences due to electronic filing) of the end	losed statement. The electronic filing may	be requested by various regulators in lieu of or in addition
to the enclosed statement.		11.1	
Mall-	TO THE	Kibber	Muniker-
Steven John Mar	lenet	Kathleen Sushin Kiefer	Robert David Kretschmer
President		Secretary	Treasurer
Subscribed and sworn to before	me this	a. Is this an original filin	9? Yes [ X ] No [ ]
Sixth day of	February 2017	b. If no,  1. State the amendm	ent number
12 DON	114	2. Date filed	
Rita F. Genliy		3. Number of pages	attached
Executive Admin Assistant I January 17, 2021	O		

Rita F. Gentry
Notary Public
Seal
Marion County, State of Indiana
My Commission Expires January 17, 2021
Commission No 641321

# Exhibit 2 - A&H Premiums Due and Unpaid

# NONE

Exhibit 3 - Health Care Receivables

NONE

Exhibit 3A - Health Care Receivables Collected and Accrued **NONE** 

Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus **NONE** 

# EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Admi	tted
						7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
Anthem Insurance Companies, Inc.	215,901					215,901	
0199999. Individually listed receivables	215,901	0	0	0	0	215,901	0
0299999. Receivables not individually listed	843					843	
		_	_	_			
0399999 Total gross amounts receivable	216,744	0	0	0	0	216,744	0

# EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Anthem, Inc.	Administrative Expenses	30,295	30,295	
The Anthem Companies, Inc	Administrative Expenses	23,945	23,945	
0199999. Individually listed payables		54,240	54,240	0
0299999. Payables not individually listed		1,325	1,325	
0399999 Total gross payables		55,565	55,565	(

# Exhibit 7 - Part 1 - Summary of Transactions with Providers **NONE**

Exhibit 7 - Part 2
NONE

Exhibit 8 - Furniture and Equipment Owned **NONE** 



# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION					2.					
								(LOCATIO	ON)	
NAIC Group Code BU	SINESS IN THE STATE (					DURING THE '		NAIC Co	mpany Code	
	1	Comprehensive (I	Hospital & Medical) 3	4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
	Total	Illuividuai	Group	Supplement	Offig	Offig	Health benefit Flair	Wedicare	Medicald	Other
Total Members at end of:										
1. Prior Year		_	1							
2. First Quarter										
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months										
Total Member Ambulatory Encounters for Year:										
7 Physician										
8. Non-Physician										
9. Total										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (b)				-						-
13. Life Premiums Direct										
14. Property/Casualty Premiums Written			<u> </u>						<u> </u>	
15. Health Premiums Earned										
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Service	s									
18 Amount Incurred for Provision of Health Care Serv	vices									



# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION					2					
								(LOCATIO	N)	
NAIC Group Code	BUSINESS IN THE STATE C	F Missouri				DURING THE Y	/EAR 2016	NAIC Co	mpany Code	
	1	Comprehensive (F		4	5	6	7	8	9	10
		2	3							
			_	Medicare	Vision	Dental	Federal Employees	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Health Benefit Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year				<u> </u>						
2. First Quarter										
3. Second Quarter										
4. Third Quarter										
5. Current Year			RIC							
Current Year Member Months										
Total Member Ambulatory Encounters for Year:										
7 Physician										
8. Non-Physician										
9. Total										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (b)				-						<del>-</del>
13. Life Premiums Direct										
14. Property/Casualty Premiums Written				-						<del>-</del>
15. Health Premiums Earned				1						
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care S	Services	-		1						
18 Amount Incurred for Provision of Health Ca	re Services									



# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION					2					
								(LOCATIO	ON)	
NAIC Group Code BU	SINESS IN THE STATE (					DURING THE '			mpany Code	
	1	Comprehensive (I	Hospital & Medical) 3	4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
	Total	ilidividual	Group	Supplement	Offig	Offig	rieaitii bellelit riaii	Wedicare	ivieuicaiu	Other
Total Members at end of:										
1. Prior Year										
2. First Quarter		_			<u> </u>				1	
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months										
Total Member Ambulatory Encounters for Year:										
7 Physician										
8. Non-Physician										
9. Total										
Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (b)										
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned										
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Service:	S									
18 Amount Incurred for Provision of Health Care Serv										

Schedule S - Part 1 - Section 2

# NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

# SCHEDULE S - PART 6 Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)

	Five Year	r Exhibit of Reinsura	nce Ceded Busines			_
		1 2016	2 2015	3 2014	4 2013	5 2012
	A ODEDATIONS ITEMS					
	A. OPERATIONS ITEMS					
1.	Premiums	0	0	0	23	35
2.	Title XVIII - Medicare	0	0	0	0	0
3.	Title XIX - Medicaid	0	0	0	0	0
4.	Commissions and reinsurance expense allowance					
5.	Total hospital and medical expenses					
	B. BALANCE SHEET ITEMS					
6.	Premiums receivable					
7.	Claims payable	0	0	0	11	12
8.	Reinsurance recoverable on paid losses	0	0	0	0	0
9.	Experience rating refunds due or unpaid					
10.	Commissions and reinsurance expense allowances due					
11.	Unauthorized reinsurance offset					
12.	Offset for reinsurance with Certified Reinsurers					
	C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13.	Funds deposited by and withheld from (F)	0	0	0	0	0
14.	Letters of credit (L)	0	0	0	0	0
15.	Trust agreements (T)	0	0	0	0	0
16.	Other (O)	0	0	0	0	0
	D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17.	Multiple Beneficiary Trust			0		
18.	Funds deposited by and withheld from (F)			0		
19.	Letters of credit (L)			0		
20.	Trust agreements (T)			0		
21.	Other (O)			0		

#### SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance As Reported Restatement Restated (gross of ceded) (net of ceded) Adjustments ASSETS (Page 2, Col. 3) Cash and invested assets (Line 12) 1. 2. Accident and health premiums due and unpaid (Line 15) 3. Amounts recoverable from reinsurers (Line 16.1) ... Net credit for ceded reinsurance XXX 5. All other admitted assets (Balance) Total assets (Line 28) LIABILITIES, CAPITAL AND SURPLUS (Page 3) 7. Claims unpaid (Line 1) 8. Accrued medical incentive pool and bonus payments (Line 2) 9. Premiums received in advance (Line 8) . Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first 10. inset amount plus second inset amount) Reinsurance in unauthorized companies (Line 20 minus inset amount) ... 11. 12. Reinsurance with Certified Reinsurers (Line 20 inset amount) Funds held under reinsurance treaties with Certif 13. 14. All other liabilities (Balance). 15. Total liabilities (Line 24) .. 16. Total capital and surplus (Line 33) XXX Total liabilities, capital and surplus (Line 34) 17. **NET CREDIT FOR CEDED REINSURANCE** 18. Claims unpaid. 19. Accrued medical incentive pool Premiums received in advance 20. 21. Reinsurance recoverable on paid losses 22. Other ceded reinsurance recoverables 23. Total ceded reinsurance recoverables Premiums receivable 24.

25.

26.

28.

30.

Unauthorized reinsurance 27. Reinsurance with Certified Reinsurers

Funds held under reinsurance treaties with authorized and unauthorized reinsurers

Funds held under reinsurance treaties with Certified Reinsurers

Other ceded reinsurance payables/offsets .

Total ceded reinsurance payables/offsets Total net credit for ceded reinsurance

#### **SCHEDULE T - PART 2**

**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN** Allocated by States and Territories Direct Business Only 5 2 3 6 Disability Income Long-Term Care Annuities Life (Group and Individual) (Group and (Group and (Group and Deposit-Type States, Etc. Individual) Individual) Individual) Contracts Totals 1. Alabama ..... Alaska .... 3. ... AZ 4. ..... AR 5. California ... CA 6 Colorado CO 7. Connecticut 8. \_\_\_\_\_ DE Delaware ..... 9. 10. Florida ..... FL 11. Georgia ...... GA Hawaii ...... HI 13. ..... ID Illinois ..... 14. .....IL Indiana ..... ..... IN 15 16. lowa ..... IA .....KS 17. Kansas .... 18. Kentucky ..... ..... KY 19. Louisiana ...... LA 20. Maine ..... ..... ME 21. ..... MD Maryland ..... 22. Massachusetts ..... ..... MA 23. Michigan ..... ..... MI 24. Minnesota... ..... MN 25. Mississippi ..... MS 26. Missouri ..... ..... MO ..... MT 27. Montana ..... 28. Nebraska ..... 29. Nevada ..... 31. New Jersey ...... 32. New Mexico ..... 33. New York ..... 34. North Carolina ...... NC ..... ND 35. North Dakota ..... ..... OH 36. Ohio 37. Oklahoma ...... OK 38. ..... OR Oregon ..... 39. Pennsylvania ..... ..... PA 40. ..... RI 41. South Carolina ..... \_\_\_\_\_ SC 42. South Dakota ...... SD 43 Tennessee ...... TN 44 Texas TX Utah ...... UT 45. Vermont ...... VT 46. 47. Virginia ...... VA 48. Washington ...... WA 49. West Virginia ..... WV 50. Wisconsin ..... WI 51. Wyoming ...... ..... WY 52. American Samoa ...... AS 53 Guam ..... GU ..... PR 54. Puerto Rico 55. U.S. Virgin Islands \_\_\_\_\_ VI 56. Northern Mariana Islands ..... MP 57. Canada ...... CAN Aggregate Other Alien ...... OT

58. 59.

Total

# **SCHEDULE Y**

# PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

				PA	MI I	A - DE I AI	L OF INSURANC	, C [	JOLU	ING COMPANT	SISIEM				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name		Number	RSSD	CIK	International)	Or Affiliates	tion		(Name of Entity/Person)	Other)		Entity(ies)/Person(s)	(Y/N)	*
	Anthem. Inc.	Code	36-3692630	RSSD	CIK	international)	American Imaging Management, Inc.	IL	Entity NIA	Imaging Management Holdings, L.L.C.	Ownership	tage	Anthem. Inc.	( Y/IN)	
00/1	Arithem, Inc.		30-3092030				AMERIGROUP Community Care of New Mexico. Inc.	IL	NI A	Imaging management hordings, L.L.C.	owner strip	100.000	Anthem, Inc.	N.	
0671	Anthem, Inc.	12354	20-2073598				AMENIONOUP COMMUNITY CATE OF New Mexico, Inc.	NM	IA	AMERIGROUP Corporation	Ownership	100 000	Anthem, Inc.	N	
0671	Anthem. Inc.		54-1739323				AMERIGROUP Corporation	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		81-4131800				Amerigroup District of Columbia, Inc.	DC	NIA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N N	
0671	Anthem. Inc.		65-0318864				AMERIGROUP Florida, Inc.	FL	IA	PHP Holdings. Inc.	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		45-2485907				Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	1
0671	Anthem. Inc.		47-3863197				AMERIGROUP Iowa. Inc.	IA	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem. Inc.		
0671	Anthem, Inc.	14276	45-3358287				Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		51-0387398				AMERIGROUP Maryland, Inc.	MD	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-4626605				Amerigroup Mississippi, Inc.	MS	NI A	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12586	20-3317697				AMERIGROUP Nevada, Inc.	NV	A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95373	22-3375292	.			AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc	N	
0671	Anthem, Inc.		13-4212818				AMERIGROUP Ohio, Inc.	H	A	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc		81-2781685				AMERIGROUP Oklahoma, Inc.	0K	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3897080				Amerigroup Partnership Plan, LLC	IL	NI A	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem, Inc.		
0671	Anthem, Inc.		36-3897080				Amerigroup Partnership Plan, LLC	IL	NI A	UNICARE Illinois Services, Inc	Ownership	25.000	Anthem, Inc.	N	4
0671	Anthem, Inc.		20-4776597				AMERIGROUP Tennessee, Inc.	TN	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		75-2603231				AMERIGROUP Texas, Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.		27-3510384				AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc	12229	06-1696189				AMGP Georgia Managed Care Company, Inc	GA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc	N	
0074			05 4004050				Anthem Blue Cross Life and Health Insurance					400.000			
0671	Anthem, Inc.	62825	95-4331852				Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1898945				Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		26-1498094 61-1237516				Anthem Health Insurance Company of Nevada	NV KY	NI A	HMO Colorado, Inc.	Ownership	100.000	Anthem, Inc.	N	0108
0671	Anthem, Inc.		31-1705652				Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.		8010
	Anthem, Inc.		02-0510530				Anthem Health Plans of New Hampshire, Inc	NE	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem. Inc.		54-0357120	40003317			Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast Inc.	Ownership	100.000	Anthem, Inc.	N	1
0671	Anthem, Inc.		06-1475928	40003317			Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.		61-1459939				Anthem Holding Corp.	IN	UIP	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Airtholl, mo.		. 01 1400000			New York Stock Exchange	Antition horaring corp.			Antifoli, file.	owner sirrp.		Anthon, me.		1
0671	Anthem, Inc.		35-2145715		6324	(NYSE)	Anthem. Inc.	IN	UIP				Anthem, Inc.	N	
	Anthem, Inc.		35-0781558			(11.02)	Anthem Insurance Companies, Inc.	IN	IA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	Y	1
	Anthem. Inc.	15543	47-0992859				Anthem Kentucky Managed Care Plan, Inc.	КҮ	IA	ATH Holding Company, LLC	Ownership.	100.000	Anthem. Inc.	N	1
	Anthem, Inc.		20-5876774				Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Ownership	_100.000	Anthem, Inc.	N	
		1					, , , , , ,			Rocky Mountain Hospital and Medical					
0671	Anthem, Inc.	61069	35-0980405	.			Anthem Life Insurance Company	IN	IA	Service, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.						Anthem Merger Sub Corp.	DE	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		81-3974489	.			Anthem Partnership Holding Company, LLC	DE	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		32-0031791				Anthem Southeast, Inc.	IN	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc		35-2129194				Anthem UM Services, Inc.	IN	NI A	UNICARE Specialty Services, Inc	Ownership	100.000	Anthem, Inc.	N	
		1								Anthem Blue Cross Life and Health Insurance					
0671	Anthem, Inc.		30-0606541				Anthem Workers' Compensation, LLC	IN	NI A	Company	Ownership	75.000	Anthem, Inc.		<b>4</b>
0671	Anthem, Inc.		30-0606541				Anthem Workers' Compensation, LLC	IN	NI A	HealthLink, Inc.	Ownership	25.000	Anthem, Inc.		
	Anthem, Inc.		95-4640529				Arcus Enterprises, Inc.	DE	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	4
	Anthem, Inc.		20-2858384				ARCUS HealthLiving Services, Inc.	IN	NI A	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		35-1292384				Associated Group, Inc.	IN	NI A	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		11-3713086				ATH Holding Company, LLC	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.		
	Anthem, Inc.	15480	20-4889378				Better Health, Inc.	FL	IA	Simply Healthcare Holdings, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	54801	58-0469845				Blue Cross and Blue Shield of Georgia, Inc Blue Cross Blue Shield Healthcare Plan of	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
0674	Anthem, Inc.	96962	58-1638390				Georgia, Inc.	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	
	Anthem, Inc.		39-0138065				Blue Cross Blue Shield of Wisconsin	WI	IA	Crossroads Acquisition Corp.	Ownership	100.000	Anthem, Inc.	Y	0108
ו/סע	Anthem, Inc.	D4003	COUBSI U—66 I				Dide cross bide shield of Misconsin	W I	IA	UTUSSIDAUS ACQUISITION CORP	.   owner sn1p	100.000	Arrithem, Inc.		8010

# SCHEDULE Y

# PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	q	10	11	12	13	14	15	16
'	2	3	4	9	0	,	0	9	10	''	Type	lf If	1 1 1 1	13	10
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC					Names of		to			Provide		Re-	
_		_	ı.	1		if Publicly Traded		ciliary		B: :: 0 : :: ::	Attorney-in-Fact,				
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
.0671 Anthem	n, Inc		95-3760980				Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	N	0101
							Blue Cross of California Partnership Plan.								
0671 Anthem	n, Inc		20-2994048				Inc.	CA	IA	Blue Cross of California	Ownership	100.000	Anthem. Inc.	N	0102
	n. Inc.		95-4694706				CareMore Health Plan	CA	IA.	CareMore Health System	Ownership.	100.000	Anthem. Inc.	N N	0103
	n. Inc.		38-3795280				CareMore Health Plan of Arizona, Inc.	AZ	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	0100
	n. Inc.		26-4001602				CareMore Health Plan of Nevada	NV NV	IA	CareMore Health System	Ownership	100.000	Anthem. Inc.	N	
													Anthem, Inc.	N	
	n, Inc		27-1625392				CareMore Health Plan of Texas, Inc.	TX	NI A	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
	n, Inc		45-4985009				CareMore IPA of New York, LLC	NY	NI A	CareMore, LLC	Ownership	100.000	Anthem, Inc	N	
	n, Inc		32-0373216				CareMore, LLC	IN	NI A	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
.0671 Anthem	n, Inc		20-2076421				CareMore Health System	CA	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
_0671 Anthem	n, Inc		46-0613946				CareMore Services Company, LLC	IN	NI A	The Anthem Companies, Inc.	Ownership	100.000	Anthem, Inc.	N	1
.0671 Anthem	n. Inc.		58-2217138				Cerulean Companies, Inc.	GA	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	N	
	n. Inc		39-1413702				Claim Management Services, Inc.	WI	NI A	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem. Inc.	N	
.DOI I AITTIOI	i, iiic		05 1410702				Community Care Health Plan of Louisiana, Inc			Blac 01033 Blac Officia 01 W13con3fff	- Office Strip.	100.000	Arthon, mo.		1
.0671 Anthem		14064	26-4674149				Community date nearth Fran of Louistana, inc	LA	IA	Anthon Doutneyshin Helding Commons, IIC	Ownership	100.000	Anthem, Inc.	N	
.uo/ I Anthen	n, Inc	10345					0 '1 1 0			Anthem Partnership Holding Company, LLC			Anthem, Inc.	N	
.0671 Anthem	n, Inc	10345	31-1440175				Community Insurance Company	H	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
							Compcare Health Services Insurance								
	n, Inc	95693	39-1462554				Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	N	
.0671 Anthem	n, Inc		20-0334650				Crossroads Acquisition Corp	DE	NI A	Anthem Holding Corp	Ownership	100.000	Anthem, Inc.		
_0671 Anthem	n, Inc		41-1905556				DeCare Analytics, LLC	MN	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
.0671 Anthem	n, Inc		02-0574609				DeCare Dental Health International, LLC	MN	NI A	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc	N	
	n. Inc.						DeCare Dental Insurance Ireland, Ltd.	IRL	NI A	DeCare Dental, LLC	Ownership.	100,000	Anthem. Inc.	N	
	n. Inc.		73-1665525				DeCare Dental Networks. LLC	MN	NIA	DeCare Dental, LLC	Ownership.	100.000	Anthem. Inc.	N	
	n. Inc.		01-0822645				DeCare Dental, LLC	MN	NI A	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	N	
			01-0022045				DeCare Operations Ireland, Limited	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	N	
	n, Inc n. Inc.		26-2544715						NIA		Ownership	100.000	Anthem, Inc.		
	.,						Designated Agent Company, Inc.			Anthem Health Plans of Kentucky, Inc.					
	n, Inc		13-3934328				EHC Benefits Agency, Inc.	NY	NI A	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
	n, Inc		23-7391136				Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
	n, Inc		. 13-3874803				Empire HealthChoice HMO, Inc.	NY		Empire HealthChoice Assurance, Inc	. Ownership	100.000	Anthem, Inc.		
_0671 Anthem	n, Inc		26-4286154				Federal Government Solutions, LLC	WI	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
.0671 Anthem	n, Inc		95-2907752				Golden West Health Plan, Inc.	CA	IA	WellPoint California Services, Inc	Ownership.	100.000	Anthem, Inc.	N	0104
							,			Blue Cross and Blue Shield of Georgia, Inc	]		,		
0671 Anthem	n. Inc.	97217	58-1473042				Greater Georgia Life Insurance Company	GA	IA		Ownership	100.000	Anthem. Inc.	N	
	n. Inc.		51-0365660				Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem. Inc.	N	
	n. Inc.		54-1237939				Health Management Corporation	VA	NIA	Southeast Services. Inc.	Ownership	100.000	Anthem. Inc.	N	
									NIA		Ownership	100.000		NN	·
	n, Inc		36-3897701				Health Ventures Partner, L.L.C.	IL		UNICARE National Services, Inc.			Anthem, Inc.		·
	n, Inc		54-1356687				HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.		
	n, Inc	95169	54-1356687				HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.		ļ
	n, Inc	96475	43-1616135				HealthLink HMO, Inc.	MO	RE	HealthLink, Inc.	Ownership	100.000	Anthem, Inc.	N	
.0671 Anthem	n, Inc		43-1364135				HealthLink, Inc.	IL	UDP	RightCHOICE Managed Care, Inc	Ownership	100.000	Anthem, Inc.	N	ļ
0671 Anthem	n, Inc		13-3865627				HealthPlus HP, LLC	NY	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	0100
0671 Anthem	n. Inc		86-0257201				Healthy Alliance Life Insurance Company	MO	I.A.	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem. Inc.	N	
	,									Rocky Mountain Hospital and Medical			, , , , , , , , , , , , , , , , , , , ,		
0671 Anthem	n. Inc	95473	84-1017384			1	HMO Colorado. Inc.	CO	IA	Service. Inc.	Ownership	100.000	Anthem. Inc.	Υ	0108
	n. Inc.		37-1216698				HMO Missouri. Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.		0100
			75-2619605			***************************************					- · · · · · · · · · · · · · · · · · · ·		Anthem. Inc.		
	n, Inc						Imaging Management Holdings, L.L.C.	DE	NI A	ATH Holding Company, LLC	Ownership	100.000		N	
0671 Anthem	n, Inc		02-0581429				Living Complete Technologies, Inc.	MD	NI A	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
					I					Anthem Health Plans of New Hampshire, Inc.			1		1
0671 Anthem	n, Inc	95527	02-0494919				Matthew Thornton Health Plan, Inc.	NH	IA		Ownership	100.000	Anthem, Inc.	N	
					1	1				Compcare Health Services Insurance			1		
0671 Anthem	n. Inc.		39-2013971				Meridian Resource Company, LLC	WI	NI A	Corporation	Ownership.	100.000	Anthem, Inc.	N	1
	n. Inc.		35-1840597				National Government Services, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem. Inc.		
	n, Inc.		46-1595582				National Telehealth Network, LLC	DE	NIA	Sellcore, Inc.	Ownership	50.000	Anthem, Inc.		0105
0671 Anther			95-4249368					DE						N	0100
	n inc	1	95-4249368				Park Square Holdings, Inc.	.   UA	NI A	WellPoint California Services, Inc	Ownership	100.000	Anthem. Inc.	I N	1

# SCHEDULE Y

# PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
=	_	_		·			•			• •	Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,			Filing	
		NIAIO					N. f	_	- 1-			ship		9	
_		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	Anthem, Inc.		95-4386221				Park Square I, Inc.	CA		WellPoint California Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		95-4249345				Park Square II, Inc.	CA		WellPoint California Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		65-0569629				PHP Holdings, Inc.	FL	NI A	AMERIGROUP Corporation	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		56-2396739				Resolution Health, Inc.	DE		Anthem Southeast, Inc.	Ownership		Anthem, Inc.	N	
0671	Anthem, Inc.		47-0851593				RightCHOICE Managed Care, Inc.	DE	UIP	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	.  N	
							Rocky Mountain Hospital and Medical Service								
	Anthem, Inc.		84-0747736				Inc.	CO		ATH Holding Company, LLC	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		20-0473316				SellCore, Inc.	DE	NI A	Anthem, Inc.	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		27-0757414				Simply Healthcare Holdings, Inc.	FL		ATH Holding Company, LLC	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		27-0945036				Simply Healthcare Plans, Inc	FL		Simply Healthcare Holdings, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		55-0712302				Southeast Services, Inc.	VA		Anthem Southeast, Inc.	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		45-4071004				State Sponsored Business UM Services, Inc	IN		UNICARE Specialty Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		35-1835818				The Anthem Companies, Inc.	IN		ATH Holding Company, LLC	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		45-5443372				The Anthem Companies of California, Inc	CA		ATH Holding Company, LLC	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		43-1967924				TrustSolutions, LLC	WI		Government Health Services, LLC	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		84-1620480				UNICARE Health Plan of West Virginia, Inc	WV		UNICARE National Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		36-3899137				UNICARE Illinois Services, Inc	IL		UNICARE National Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		52-0913817				UNICARE Life & Health Insurance Company	IN		UNICARE National Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		95-4635507				UNICARE National Services, Inc	DE		Anthem Holding Corp	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		77-0494551				UNICARE Specialty Services, Inc.	DE		Anthem Holding Corp.	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		36-4014617				UtiliMED IPA, Inc	NY		American Imaging Management, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		20-4405193				WellPoint Acquisition, LLC	IN		Anthem, Inc.	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		20-2156380				WellPoint Behavioral Health, Inc	DE	NI A	UNICARE Specialty Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		95-4640531				WellPoint California Services, Inc	DE		Anthem Holding Corp.	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		95-4657170				WellPoint Dental Services, Inc	DE		UNICARE Specialty Services, Inc	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		81-2874917				WellPoint Health Solutions, Inc.	DE		Federal Government Solutions, LLC	Ownership		Anthem, Inc.	.  N	
0671	Anthem, Inc.		20-3620996				WellPoint Holding Corp	DE	NI A	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
							WellPoint Information Technology Services,								
	Anthem, Inc.		45-2736438				Inc	CA		Blue Cross of California	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		36-4595641				WellPoint Insurance Services, Inc.	HI		Anthem, Inc.	Ownership		Anthem, Inc.	.  N	
	Anthem, Inc.		47-2546820				WellPoint Military Care Corporation	IN		Government Health Services, LLC	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		47-5569628				Wisconsin Collaborative Insurance Company	WI		Crossroads Acquisition Corp	Ownership		Anthem, Inc.	.  N	0107
	Anthem, Inc.		98-0552141				WPMI (Shanghai) Enterprise Service Co. Ltd.			WPMI, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-8672847				WPMI, LLC	DE	NI A	ATH Holding Company, LLC	Ownership	69.910	Anthem, Inc.	.  N	0106
	,						·······, <del></del>			, <u></u>			,,		1

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Compnay Code in column 3 because it is regulated by the California Department of Managed Health Care.
0103	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0104	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0105	50% owned by unaffiliated investors
0106	30.0% owned by unaffiliated investors
0107	50% owned by an unaffiliated investor
0108	Received exemption from domestic regulator

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# **SCHEDULE Y**

# PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

	PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES												
1	2	3	4	5	6	7 Income/ (Disbursements)	8	9	10	11	12	13	
					Purchases, Sales or Exchanges of Loans, Securities,	Incurred in Connection with Guarantees or		Income/ (Disbursements)		Any Other Material Activity Not in the		Reinsurance Recoverable/ (Payable) on	
NAIC			0	0 " 1	Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or	
Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Mortgage Loans or Other Investments	the Benefit of any Affiliate(s)	Agreements and Service Contracts	Reinsurance Agreements	*	the Insurer's Business	Totals	Reserve Credit Taken/(Liability)	
Code		American Imaging Management, Inc.	Dividends	Continuations	Other investments	Allillate(5)	(45, 143, 273)	Agreements		Dusiness	(45.143.273)	rakeri/(Liability)	
12354	20-2073598	AMERIGROUP Community Care of New Mexico,											
12001	20 2070000	Inc.					(2,376,606)				(2,376,606)		
	54-1739323	AMERIGROUP Corporation					(23,463,877)				(23,463,877)		
95093	65-0318864	AMERIGROUP Florida, Inc.		10.000.000			(138,420,433)				(128,420,433)		
	45-2485907	AMERIGROUP Insurance Company					(46,993,561)				(46,993,561)		
	47-3863197	AMERIGROUP Iowa. Inc.		250.000.000			(78,378,221)				171,621,779		
	45-3358287	AMERIGROUP Kansas, Inc.		, ,			(74,340,938)				(74,340,938)		
95832	51-0387398	AMERIGROUP Maryland, Inc.	(20,000,000)				(121,837,959)				(141,837,959)		
		AMERIGROUP Nevada, Inc.	, , ,				(61,302,699)				(61,302,699)		
95373	22-3375292	AMERIGROUP New Jersey, Inc.	(50,000,000)				(145,692,060)				(195,692,060)		
10767	13-4212818	AMERIGROUP Ohio Inc					(469,933)				(469,933)		
	36-3897080	AMERIGROUP Partnership Plan, LLC					(26,852,245)				(26,852,245)		
12941	20-4776597	AMERIGROUP Tennessee, Inc.					(190,076,813)				(190,076,813)		
95314	75-2603231	AMERIGROUP Texas, Inc.	(30,000,000)				(404,082,715)				(434,082,715)		
	27-3510384	AMERIGROUP Washington, Inc.	(12,000,000)				(68,215,341)				(80,215,341)		
		AMGP Georgia Managed Care Company, Inc	(15,000,000)				(142,727,809)				(157,727,809)		
62825	95-4331852	Anthem Blue Cross Life and Health											
		Insurance Company, Inc.	(235,600,000)				(941,956,611)	(983,470)			(1, 178, 540, 081)	1,511,335	
	61-1237516	Anthem Health Plans of Kentucky, Inc	(95,000,000)				(391,288,399)				(486,288,399)		
	31-1705652	Anthem Health Plans of Maine, Inc.	(22,100,000)				(111,362,268)			ļ	(133,462,268)		
53759	02-0510530	Anthem Health Plans of New Hampshire,											
		Inc	(10,000,000)				(50,981,912)				(60,981,912)		
	54-0357120	Anthem Health Plans of Virginia, Inc	(216, 100, 000)				(614,651,485)	10,369,959			(820, 381, 526)	(4,585,268)	
	06-1475928	Anthem Health Plans, Inc.	(91,800,000)				(304,498,539)				(396,298,539)		
		Anthem Insurance Companies, Inc	(325,000,000)				(1,254,634,382)		<del>-</del>		(1,568,567,134)	(1,644,166)	
		Anthem Kentucky Managed Care Plan, Inc					(64,835,810)			<b></b>	(64,835,810)		
13573		Anthem Life and Disability Insurance											
		Company					(1,071,963)				(1,071,963)		
61069		Anthem Life Insurance Company	(18,900,000)				(35,571,292)	17,800,662		<b></b>	(36,670,630)	(23,079,605)	
	35-2145715	Anthem, Inc.	2,611,100,000	(300,000,000)			6,354,566,658				8,665,666,658		
45,000	11-3713086	ATH Holding Company, LLC					(41,675,909)				(41,675,909)		
	20-4889378	Better Health, Inc.				<b> </b>	(40,459,168)			<del> </del>	(40,459,168)		
54801		Blue Cross and Blue Shield of Georgia,	(70 000 000)				(050 300 6:5)				(400 000 0:5:		
00000		Inc. Blue Cross Blue Shield Healthcare Plan of	(73,600,000)				(352,736,642)				(426,336,642)		
96962			(05.700.000)				(404 044 040)				(407 544 040)		
E4000	00 0400005	Georgia, Inc	(25,700,000)			·	(401,841,849)			<del> </del>	(427,541,849)		
			(60,000,000)				(137,431,914)				(197,431,914)		
		Blue Cross of California	(425,000,000)			····	(1,318,129,334)			<del> </del>	(1,743,129,334)		
		Blue Cross of California Partnership Plan. Inc.				1	(222 222 740)				(220, 220, 740)		
		Caremore Health Plan	(50,000,000)				(332,338,749)				(332,338,749)		
13562		Caremore Health Plan of Arizona, Inc.	(000,000,000)				(187,480,869)				(237,480,869)		
							(21, 134, 855)			<del> </del>	(36,300,363)		
CUOCI	ZU-4UU 10UZ	Caremore Health Plan of Nevada					L(∠I, I34,୪55)			1			

# PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	g	10	11	12	13
<b>.</b> 		3	4	ບ	ō	Income/ (Disbursements)	o	¥	10		12	13
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate.	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent,	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's		Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
		Caremore, LLC					(11,857,052)				(11,857,052)	
14064	26-4674149	Community Care Health Plan of Louisiana,										
		Inc		20,000,000			(69,006,060)				(49,006,060)	
10345	31-1440175	Community Insurance Company	(266, 200, 000)				(911,412,383)				(1, 177, 612, 383)	
95693	39-1462554	Compcare Health Services Insurance										
		Corporation	(10.000.000)				(92,054,648)				(102.054.648)	
		DeCare Dental, LLC	, , , , , , , , , , , , , , , , , , , ,				(45,567,014)				(45,567,014)	
55093		Empire HealthChoice Assurance, Inc.	(250,000,000)				(528, 256, 823)				(778,256,823)	
		Empire HealthChoice HMO. Inc.					(122,558,319)				(122,558,319)	
		Golden West Health Plan, Inc.					(790,279)				(790,279)	
		Greater Georgia Life Insurance Company					(7,681,353)				(7,681,353)	
		Health Core. Inc.					(21,346,159)			T	(21,346,159)	
		HealthKeepers, Inc.	(35,000,000)	15,000,000			(388,403,745)	(10,369,959)		<b>†</b>	(418,773,704)	4.585.268
		HealthLink HMO, Inc.	(10,000,000)				5,219,475	(10,000,000)			(4,780,525)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		HealthLink, Inc.					(60,489,216)			<b>-</b>	(60,489,216)	
		HealthPlus LLC					(300,587,736)			†	(300,587,736)	
78972	86-0257201	Healthy Alliance Life Insurance Company	(105,200,000)				(294,007,288)				(399,207,288)	
		HMO Colorado. Inc.	(100,200,000)	15,000,000			(40,662,843)				(25,662,843)	
		HMO Missouri, Inc.	(800,000)	13,000,000			(18,848,458)			†	(25,662,643)	
		HTH Re. LTD	(000,000)				(10,040,430)	983.470			983,470	(1,511,335)
		Matthew Thornton Health Plan, Inc.	(30,000,000)				(75.499.873)	900,470		<b>-</b>	(105.499.873)	(1,311,333,
93327	35-1840597	National Government Services, Inc.	(30,000,000)				(20, 169, 845)			<del> </del>	(20, 169, 845)	
	47-0851593	RightCHOICE Managed Care, Inc.					(22,510,682)				(22,510,682)	
	84-0747736	Rocky Mountain Hospital and Medical					(22,310,082)				(22,310,062)	
11011		Service, Inc.	(78.100.000)	(45 000 000)			(057 700 740)				(050,000,740)	
10700		Simply Healthcare Plans, Inc.	(78, 100,000)	(15,000,000)			(257,720,740)				(350,820,740)	
13726							(140,514,747)				(140,514,747)	
		The Anthem Companies of California, Inc					146,341,009			<del> </del>	146,341,009	
	35-1835818	The Anthem Companies, Inc.					4,887,345,537				4,887,345,537	
11810	84-1620480	UNICARE Health Plan of West Virginia, Inc.					(40, 400, 505)				(40, 400, 505)	
00014	50 0010017	INVOIDE L.C. A.H. LILL I	/50.000.000				(43, 128, 585)	/00 007 0101		<del> </del>	(43, 128, 585)	
80314		UNICARE Life & Health Insurance Company	(50,000,000)				(48, 109, 062)	(28,867,910)		-	(126,976,972)	24,723,771
	45–2736438	WellPoint Information Technology Services										
			ļ				349,756,226			<del> </del>   -	349,756,226	
		WellPoint Military Care Corporation	ļ				(7,365,246)			ļ	(7,365,246)	
15929	47-5569628	Wisconsin Collaborative Insurance Company										
				5,000,000			(3,923,953)				1,076,047	
9999999 Co	ontrol Totals		0	0	0	0	0	0	XXX	0	0	0

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

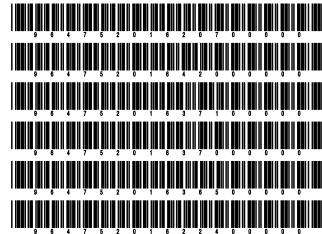
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	tollowing the interrogatory questions.		Responses				
	MARCH FILING		1/50				
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile b Will an actuarial opinion be filed by March 1?	YES					
2. 3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March	YES YES					
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile		YES				
		,,	120				
	APRIL FILING						
5.	Will Management's Discussion and Analysis be filed by April 1?		YES				
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?		YES				
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?		YES				
	JUNE FILING						
8.	Will an audited financial report be filed by June 1?		YES				
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and e	lectronically with the NAIC by June 1?	YES				
	AUGUST FILING	•					
10.	Will the regulator-only (non-public) Communication of Internal Control Related M						
	electronically with the NAIC (as a regulator-only non-public document) by Augu	st 1?	YES				
	The following supplemental reports are required to be filed as part of your annu	al statement filing. However, in the event that your company do	oes not transact the type of				
	business for which the special report must be filed, your response of NO to the	specific interrogatory will be accepted in lieu of filing a "NONE"	" report and a bar code will				
	be printed below. If the supplement is required of your company but is not being the interrogatory questions.	filed for whatever reason enter SEE EXPLANATION and provi	de an explanation following				
	the interrogatory questions.  MARCH FILING						
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the sta		NO				
12.	Will the Supplemental Life data due March 1 be filed with the state of domicile at	nd the NAIC?	NO				
13.	Will the Supplemental Property/Casualty data due March 1 be filed with the state	of domicile and the NAIC?	NO				
14.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of		NO				
15.	Will the actuarial opinion on participating and non-participating policies as requir		NO				
16.	be filed with the state of domicile and electronically with the NAIC by March 1?. Will the actuarial opinion on non-guaranteed elements as required in Interrogato		NO				
	domicile and electronically with the NAIC by March 1?		NO				
17.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile		NO				
18.							
19.	electronically with the NAIC by March 1?						
	electronically with the NAIC by March 1?		NO				
20.	Will an approval from the reporting entity's state of domicile for relief related to the		NO				
	with the NAIC by March 1?APRIL FILING		INU				
21.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domic	ile and the NAIC by April 1?	NO				
22.	Will the Supplemental Life data due April 1 be filed with the state of domicile and	the NAIC?	NO				
23.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1	· · · · · · · · · · · · · · · · · · ·	NO				
24.							
25.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense NAIC by April 1?		NO				
	AUGUST FILING	ì					
26.	Will Management's Report of Internal Control Over Financial Reporting be filed w	with the state of domicile by August 1?	NO				
	Explanations:						
11. 12.							
13.							
14.							
15.							
16.							
17.							
18.							
19. 20.							
21.							
22.							
23.							
24. 25.							
26.							
	Bar Codes:						
11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]						
12.	Life Supplement [Document Identifier 205]						
	End Supplement [Decament Identifier 200]						
13.	Property/Casualty Supplement [Document Identifier 207]						
14.	SIS Stockholder Information Supplement [Document Identifier 420]						
		9 6 4 7 5 2 0 1 6 4 2 0 0 0	0 0 0				
15.	Participating Opinion for Exhibit 5 [Document Identifier 371]						

18. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]

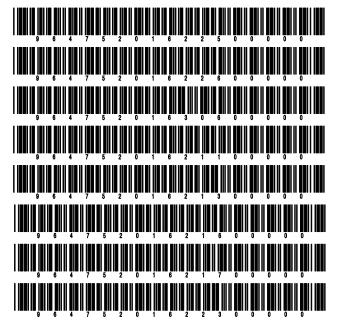
16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]

Medicare Part D Coverage Supplement [Document Identifier 365]



# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 20. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 21. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 22. Life Supplement [Document Identifier 211]
- Property/Casualty Supplement Insurance Expense Exhibit [Document Identifier 213]
- 24. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 25. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



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